



1712

PATENT
Attorney Docket No.: QUANT1190-2
(028248-1003)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Group Art Unit: Unassigned
Dershem et al.) Examiner: Unassigned
Application No.: 09/580,026) CERTIFICATION UNDER 37 CFR § 1.8
Filed: May 26, 2000) I hereby certify that the documents referred to as
For: THERMOSETTING RESIN) enclosed herein are being deposited with the United
COMPOSITIONS CONTAINING) States Postal Service as first class mail on this date
MALEIMIDE AND/OR VINYL COMPOUNDS) 6/13/01, in an
) envelope addressed to: Assistant Commissioner for
) Patents, Washington, D.C. 20231
) Stephen E. Reiter, Reg. No.: 31,192
) (Name of person mailing paper)
) SEDR E.R. 6/13/01
) Signature Date

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL SHEET

Sir:

Transmitted herewith for the above-identified application please find:

1. Request for Reconsideration of the Dismissal of the Petition Under 1.47(a).
2. A copy of the sealed envelope (Exhibit A) addressed to Inventor Dennis B. Patterson.
3. A copy of PS Form 3811 postcard (Exhibit B) addressed to Inventor Jose Osuna.
4. Return postcard.

RECEIVED
JUN 21 2001
TC 1700 MAIL ROOM

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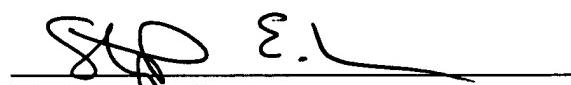
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Dershem et al.
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No fee is deemed necessary in connection with the filing of this Request. However, if any fee is required, authorization is hereby given to charge the amount of any such fee to Deposit Account No. 50-0872.

Respectfully submitted,

Date: 6/13/01


Stephen E. Reiter
Registration No. 31,192
Attorney for Applicant
Telephone: 619-685-6445
Facsimile: 619-234-3510

Foley & Lardner
402 W. Broadway
23rd Floor
San Diego, CA 92101

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Dennis Patterson
36855 Clearwood Court
Palmdale, CA 93550

QUANT 1190-2

2. Article Number (Copy from service label)**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)	B. Date of Delivery
---------------------------------------	---------------------

C. Signature**X** Agent Addressee**D. Is delivery address different from item 1?** Yes

If YES, enter delivery address below:

 No**3. Service Type**

- | | |
|--|---|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7000 1530 0002 5062 8179



FOLEY & LARDNER

ATTORNEYS AT LAW

402 W. BROADWAY, 23RD FLOOR

SAN DIEGO, CALIFORNIA 92101-3542

Mr. Dennis B. Patterson
36855 Clearwood Court
Palmdale, CA 93550

UNIQUE
ASSET
OFFICE
OF
FEDERAL
BUREAU
OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
1st Notice
2nd Notice
Return Notice

UNITED STATES POSTAL SERVICE

F 1 0 5

JUN 1

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

RECEIVED

• Sender: Please print your name, address, and ZIP+4 in this box •
JUN 11 2001

FOLEY & LARDNER

FOLEY & LARDNER
ATTORNEYS AT LAW
402 W. BROADWAY, 23RD FLOOR
SAN DIEGO, CALIFORNIA 92101-3542
ATTENTION: STEPHEN E. REITER

92101-3542

00000000000000000000000000000000

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse, so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Jose Osuna
2568 Orchard Heights Ave.
Albany, OR 97321

(QUANT 1190-2)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

JUN 05 2001

B. Date of Delivery

C. Signature

X

Jose Osuna

Agent

Addressee

D. Is delivery address different from item 1?

YES, enter delivery address below:

Yes

No

3. Service Type

- | | |
|--|---|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number (Copy from service label)

PS F rm 3811, July 1999

Domestic Return Receipt

102595-00-M-0852

RECEIVED

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